

**Cabinet for Health and Family Services
Office of Health Policy
Data Advisory Subcommittee
Tuesday, March 22, 2011
1:00 PM – 3 PM
CHFS Public Health Auditorium, Suite C**

Agenda

- I. Welcome and Opening Remarks
- II. Approval of Minutes (November 30, 2010)
- III. Update on GOEHI
- IV. Discussion of new CPT/HCPCs codes for next revision to Data Reporting Manuals and schedule for filing regulation (See attached file for background information regarding new codes to be discussed at meeting)
- V. Update on data submissions to IPOPOP
- VI. Update on implementation of Kentucky Brain and Spinal Cord Injury Central Registry
- VII. Update on status of moving submitted data from IPOPOP to InfoSuite
- VIII. Introduction of new APCD staff
- IX. Discussion changes to Public Use Data Set to increase the number of diagnosis and procedure codes from 9 to 25
- X. New web pages created with MONAHRQ software
- XI. Adjourn

**Cabinet for Health and Family Services
Office of Health Policy
Data Advisory Subcommittee
Tuesday, November 30, 2010
1:00 PM – 3:00 PM
CHFS Public Health Auditorium, Suite A**

MEMBERS PRESENT:

Hope Barrett (on behalf of Louis Kurtz)
Dept. for Behavioral Health,
Developmental and Intellectual
Disabilities

James Berton
King's Daughters Medical
Center

Ron Crouch
Education and
Workforce
Development
Cabinet

Tim Marcum
Baptist Hospital East

Chuck Warnick
Kentucky Hospital
Association

MEMBERS ABSENT:

Sherill Cronin, Ph.D.
Bellarmine University

Carol Ireson
University of Kentucky

Louis Kurtz
Dept. for
Behavioral Health,
Developmental and
Intellectual
Disabilities

Dr. John Lewis

Dr. Ruth Shepherd
Department for Public Health

Ben Yandell
Norton Healthcare

STAFF:

CHFS, Department for Public Health
Charles Kendell

Office of Health Policy

Carrie Banahan

Sheena Eckley

Kris Hayslett

Beth Morris

Chandra Venettozzi

GUESTS:

Voin Barker, Office of Insurance

Melanie Moch, Kentucky Hospital Association

Susan Tipton (on behalf of Marie Cull), Cull, Hayden and Vance

CALL TO ORDER

Charlie Kendell called the meeting to order in the CHFS Public Health Auditorium, Suite A.

WELCOME AND OPENING REMARKS

Charlie welcomed the subcommittee and guests.

APPROVAL OF MINUTES

Minutes from the meeting of July 12, 2010, were approved as distributed.

NON-COMPLIANT FACILITIES FOR JULY 1, 2009, THROUGH JUNE 30, 2010

Chandra presented an updated version of the Operations and Activities Report for July 1, 2009, through June 30, 2010. All finalized data has been received from COMPData, making it possible to look at data for the last two quarters of 2009 and the first two quarters of 2010. There are six hospitals that were non-compliant for all or part of those quarters; one of which is repeatedly non-compliant. Four of the ambulatory facilities were also non-compliant for all or part of those quarters. Letters have been sent to these facilities advising them to submit their outstanding data by December 31. Compliance issues from a year ago have significantly improved.

STATUS OF AMBULATORY FACILITIES THAT ARE STILL NOT REPORTING

Currently, eight ambulatory surgery centers are not reporting. An alternative mechanism for reporting will be necessary in order for two of these facilities to report. There are two ambulatory care clinics that are not submitting. Chandra and Melanie Moch will be working with these clinics. Six SMTs or MHSs are not reporting. Any facilities that are still not reporting at the end of the quarter will be sent a letter informing them that they must be compliant by 1st quarter 2011. At that time, new facilities that were identified during the last year will be contacted to begin submitting their data.

PROPOSED CHANGES TO THE HEALTH INFORMATION WEB SITE

Chandra described the proposed changes to the website. The reference to the Website Awarded Best of Kentucky and Kentucky Hospital Listing will be removed. A section on administrative claims will be added. In addition, information regarding statutory authority, administrative regulations, public use data sets, and data reporting manuals will also be added. A Kentucky Reporting Facility listing in both Excel and .pdf format will be added at a later date in order to give facilities time to report for this quarter.

UPDATE ON THE IPOP IMPLEMENTATION

Melanie Moch provided an update on the IPOP data collection system. The system is up and running and data is still being collected for 3rd quarter 2010. The quarter will be closed on December 15. Currently, there are four hospitals and four ambulatory facilities who have not submitted any data for 3rd quarter. There have been several formatting issues over the last couple of months. The primary issue has been missing primary CPT codes and HCPCS codes in the first position. KHA has been

working with vendors and IT departments to resolve this issue. Several facilities have contacted KHA asking about deadlines. Currently, there is a deadline for the discharge case count and a separate deadline for the actual data. KHA is making the recommendation that one deadline be used. Another issued being experienced is with the new edit for 1% compliance of unknown values. KHA is also recommending changing the 1% to 3% due to issues with the classification of Hispanics as race instead of ethnicity.

Each time a facility verifies their data for the quarter, an e-mail will be automatically sent to them containing several reports, such as revenue, race, primary payor, state and county, and present on admission reports . This e-mail will be sent to the data coordinators and to the CEO or administrator.

DESIGNATION OF PRIMARY CPT

Chuck Warnick stated that KHA is currently in data testing with this function. As stated in previous meetings, there are some facilities that did not submit any CPT or HCPCS codes beginning in 2008 and going forward. The decision was made to require facilities to resolve this issue by December 31. Once replacement cases are received from these facilities, KHA will run the algorithm again from 2008, 2009, and the available quarters from 2010 and assign them primary CPT codes. At that point, new data files will be sent to the Cabinet and to KIPRC. The InfoSuite product will be turned on as soon as the beta testing is complete. Users will be notified of limitations and will be able to run reports based on using the primary CPT codes.

DRAFT ANNUAL REPORT TO LRC

Chandra stated that the Cabinet is required by statute to submit an annual report to LRC. The previous version of the report was shared with the Subcommittee last year. One of the changes from the previous year's report is the addition of a section on new facilities. There has been an increase from 53 datasets requests in the previous year to 83 data requests. Next year's report will include the section on our move to a new data collection entity.

UPDATE ON DATA REPORTING REGULATION

The data reporting regulation was filed on September 15. October was the comment period and in November, the regulation went to the administrative regulation review subcommittee. There were no comments on the regulation from LRC or externally. When Health and Welfare meets on December 15, the current manuals and regulation will be final. Due to the issues described by Melanie earlier, it is anticipated that the following changes will be made to the regulation: compliance rate from 1% to

3% on edits; the date to submit case counts; and add the new CPT codes. The regulation will be out for review in March and is expected to be filed by April 15.

ADJOURN

The meeting was adjourned.

Proposed changes to CPT HCPCS codes in new revision of Data Reporting Manuals.

The following codes are recommended by OHP and KHA for addition:

Outpatient Surgical Category I, II, III	Other Outpatient Procedures	Observation Care	Mammography
69210 – removal of impacted cerumen	74176 – 74178 – computed tomography	99224 – 99226 – subsequent observation care	G0202 – G0206 – Screening mammography
11762 – reconstruction of nail bed with graft	74261 – 74263 – CT colongraphy	G0378-G0379 – Hospital observation	
11750 – excision of nail and nail matrix for permanent removal	75571-75574 – CT heart		
11752 – with amputation of tuft of distal phalanx	75565 – cardiac MRI		
G0106 – colorectal cancer screening	77371-77373 – radiation tx delivery, SRS		
G0120 – colorectal cancer screening	77427 – radiation tx management		
G0122 – colorectal cancer screening	77431 – radiation therapy management		
Q1004 – intraocular lens category 4	77435 – stereotactic body radiation therapy		
Q1005 – intraocular lens category 5	77499 – unlisted procedure, therapeutic radiology tx		
92132 – ophthalmic diagnostic imaging, anterior segment	93660 – evaluation of cardiovascular function with tilt table eval		
32561-32562 – instillation, via chest tube/catheter			
32601-32606 – thoracoscopy, diagnostic; lungs, pleural space			
0051T – implantation of total replacement of heart system			
0163T-0165T – total disc arthroplasty, removal and revision			
0253T – internal approach, into suprachoroidal space			
C1888 – catheter, ablation			
C1730-C1733 – catheter, electrophysiology			
C2630 – catheter, electrophysiology, diagnostic/ablation			
C1725 – catheter, transluminal angioplasty			

C1885 – catheter, transluminal angioplasty, laser			
A4300-A4306 – implantable access catheter			
C9726 – placement and removal of applicator into breast for radiation therapy			
C9728 – placement of interstitial device for radiation therapy/surgery			
0245T-0248T – open tx of rib fracture requiring internal fixation			
0254T – endovascular repair of iliac artery bifurcation			
0256T-0259T- implantation of catheter-delivered prosthetic aortic heart valve			
G0288 – reconstruction, computed tomography angiography of aorta for vascular surgery			
0042T – cerebral perfusion analysis			
S8042 – MRI, low field			
C8931-C8933 – magnetic resonance angiography with or without contrast			
C8934-C8936 - magnetic resonance angiography with or without contrast			
G0219 – PET imaging whole body			
G0235 – PET imaging any site			
G0251-G0252 – linear accelerator based stereotactic radiosurgery and PET imaging			
0073T – compensator based beam modulation treatment delivery			
0197T – intra-fraction localization radiation therapy			
0234T-0283T – transluminal peripheral artherectomy, renal, visceral arteries, aorta			
G0290-G0291 – transcatheter placement			
92133-92134 –ophthalmic diagnostic imaging, anterior segment			
0196T – arthrodesis, each additional interspace			

When the above list was sent to data coordinators and KHA's data committee the following comments were received:

One group suggested also including the following codes:

D3220 – Therapeutic pulpotomy
D2930 – Prefabricated stainless steel crown-primary tooth
D2330 – resin-one surface, anterior
D2331 – resin-two surfaces, anterior
D2391 – resin-based composite crown, anterior
D1351 – sealant-per tooth
D2332 – resin-three surfaces, anterior
D2392 – resin-based composite – two surfaces, anterior
D2335 – resin-four or more surfaces or involving incisal angle (anterior)
D7140 – extraction, erupts tooth or exposed root (elevation and/or forceps removal)

One group suggested that we NOT include the following codes:

G0122 – NO
Q1004 – NO
Q1005 - NO
C1730-C1733 – NO
C2630 – NO
C1725 – NO

KY IPOP Data Coordinator's Manual for Ambulatory Facilities Highlights of Changes

The following changes were made to this version of the manual.

- Revised date changed to April 1, 2011
- Change the website address to www.kyipop.org
- Page 7 - Data Submission Highlights Examples add the following items:
 - If the batch contains 80% of duplicate patient control numbers the batch will be rejected.
 - The batch will reject if it contains more than 3% of records with Race of 'R9'.
 - The batch will reject if it contains more than 1% of records with Payer Code '00000'.
- Page 8 – Mandatory Data Submissions (Types of data required to be submitted), add the following procedure codes under Observation Care:
 - 99224-99226
 - G0378-G0379
- Page 10 – Outpatient Surgical and Other Outpatient Procedures Codes adding the following CPT/HCPCS codes

Outpatient Surgical Category I, II, III	Other Outpatient Procedures	Mammography
69210	74176-74178	G0202-G0206
11762	74261-74263	
11750	75571-75574	
11752	75565	
G0106	77371-77373	
G0120	77427	
G0122	77431	
Q1004	77435	
Q1005	77499	
92132	93660	
32561-32562		
32601-32606		
0051T		
0163T-0165T		
0253T		
C1888		
C1730-C1733		
C2630		
C1725		
C1885		
A4300-A4306		

C9726		
C9728		
0245T-0248T		
0254T		
0256T-0259T		
G0288		
0042T		
S8042		
C8931-C8933		
C8934-C8936		
G0219		
G0235		
G0251-G0252		
0073T		
0197T		
0234T-0238T		
G0290-G0291		
92133-92134		
0196T		

- Page 11 - Data Submission Time Table add the following
 - Initial submissions of Case Counts and Case Data are due no later than 45 days after the quarter close date. If the 45th day falls on a weekend or a holiday, the submission will be due on the next working day.
 - Final Submission for Case Counts and Case Data are due 75 days from the quarter close date. If the 75th day falls on a weekend or a holiday, the submission will be due on the next working day.
- Page 14 - Case Count Submission Time Table
 - Initial submissions of Case Counts and Case Data are due no later than 45 days after the quarter close date. If the 45th day falls on a weekend or a holiday, the submission will be due on the next working day.
 - Final Submission for Case Counts and Case Data are due 75 days from the quarter close date. If the 75th day falls on a weekend or a holiday, the submission will be due on the next working day.
- Page 15 - Outpatient Counting Method add the following clarification made on how to count an outpatient case
 - Each time an account is created that is counted as 1 case no matter how many visits the patient is seen for. If the account is created then discharged and the patient returns and a new account is created that would be 2 cases.

- File Formats
- Page 20 and Page 43 Payer Mapping Codes - Adding clarification to Charity
 - Charity is defined according to the Hospital policy at time of discharge
- Page 34 and Page 44 - Race
 - Add No more than 3% of cases may contain R9 – Other
- pages 67 – 71 - KY IPOP Sample Reports

Kentucky Brian and Spinal Cord Injury Central Registry

Kentucky Brain and Spinal Cord Injury Central Registry

- KRS 211.474-478 authorizes the Traumatic Brian Injury Trust Fund Board to promulgate administrative regulations to access medical records of patients with reportable brain and spinal cord injuries for the sole purpose of collecting additional information that is not available in the data obtained from the cabinet pursuant to KRS 216.2920 to 216.2929.

Kentucky Brain and Spinal Cord Injury Applicable Conditions and ICD-9 Codes

The Kentucky Brain and Spinal Cord Injury Central Registry accept data for the following conditions:

1. Traumatic Brain Injury
 - a. Fracture of vault or base of skull 800.0-801.9
 - b. Other, unqualified, and multiple fractures of the skull 803.0-804.9
 - c. Intracranial injury including concussion, cerebral laceration, subdural hemorrhage; or unspecified intracranial injury 850.0-854.1
2. Acquired Brain Injury
 - a. Anoxia 348.1, 668.2, 669.4, 768.1, 768.5, 768.6, 768.9, 799.01, 799.02, 994.1, 994.7, 997.0
 - b. Allergy Anaphylaxis 995.0, 999.4, 999.5
 - c. Acute Medical Clinic Incidents 320.0-320.9, 321.0-321.8
 - d. Toxic Substances 964.2, 967.0-967.9, 968.0-968.9, 980.0-980.9, 985, 986, 988.0-988.2, 989.0, 995.4, 995.5, 998.0
3. Spinal Cord Injury
 - a. Fracture of vertebral column with spinal cord injury 806.0-806.9
 - b. Spinal Cord Injury without evidence of spine bone injury 952.0-952.9
4. Stroke
 - a. Cerebrovascular Disease 430-438

Other Kentucky Brian and Spinal Cord Injury Central Registry Required Data

UB / 837 records that meet the above conditions must have additional data elements, which are detailed in this section, reported on each claim. These elements are noted as specific to the KY Brian and Spinal Cord Injury Central Registry on both file formats. They include, but are not limited to:

- Patient's Legal First Name
- Patient's Legal Middle Initial
- Patient's Legal Last Name
- Patient's Street Address
- Medical Record Number
- Social Security Number